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Inaugural Dissertation

On

Dysentery

By

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## Dysentery.

Upon the consideration of this disease I enter with a diffidence arising from a conviction of my incapability to investigate the subject with the requisite accuracy and precision.

Submitting, however, to the inspection of a Faculty characterised by a generous and liberal spirit, the subsequent observations, I entertain not apprehensions that they will meet with a rigid or fastidious criticism.

The term 'Dysentery' is compounded of two Greek words importing a deficiency of power in the intestines to perform with their usual facility their appropriate office.

This disease from the



circumstance of its frequent occurrence, from its being incident to the inhabitants of every section of the world, and from the fatality attendant on it in instances innumerable, well merits the serious attention of every practitioner of Medicine.

As premonitory of its accession there is generally an inconsiderable degree of heat alternating with chills and accompanied with nausea, flatulency, constipation and lassitude. To these symptoms succeed augmentation of vascular action; excessive thirst, slight vomiting and (at no distant interval) tormina and tenesmus.

The excrementitious discharges generally consist of mucus, with an intermixture of bile, and a greater or less proportion of sanguineous matter. Sometimes during the continuance of the dis-



lead a watery discharge, acrid and corroding in its nature takes place. Statural feces are rarely excreted, notwithstanding the frequency of evacuations: when they do appear they are always in small, indurated masses, denominated *scybala* and invariably afford a temporary remission of the symptoms above enumerated, and particularly of the tormina and tenesmus.

As the disease advances the tormina and tenesmus become more considerable, the fever continues to increase, and the patient suffers the greatest mental and corporeal disquietude. If the progress of the attack be not arrested at this period, an exacerbation of most of the symptoms succeeds: the alvine evacuations exhale an insupportably fetid and cadaverous odour, and a prolapsus ani results from the





frequently repeated efforts to defect the contents of the intestines: the tongue becomes encrusted with an offensive matter: great prostration of muscular power and extraordinary emaciation now ensue, and if the most vigorous efforts of medical skill and the most assiduous attention be not exerted; delirium, coldness of the extremities, subultus tendinum, and impeded deglutition succeed, and death finally supervenes. —

In milder cases the disease is associated with little apparent febrile action and after a short duration spontaneously departs. — In some instances the fever after having continued for a time gradually abates and ultimately disappears the proper dysenteric symptoms remaining: in this form of Dysentery we apply the epithet "chronic".



Pyrexia generally makes its appearance about the conclusion of summer, or the commencement of Autumn and for the most part prevails in dry and elevated situations, intermittent or remittent fever contemporarily affecting persons in the vicinity of the low and marshy grounds.

Insects display the following phenomena. Traces of inflammation with the appearances consequent to it, as ulceration and gangrene, in the colon & rectum. Indications of inflammatory action are sometimes manifested in the serous substance.

### Diagnosis.

Enteritis may sometimes be confounded with Dysentery, but attention to the following marks of distinction will enable us to discriminate with facility between them.

1. In the former disease there is always



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present an evident degree of arterial excitement  
as the latter the circulation is much accel-  
erated, is connected with and other circumstances  
indicative of febrile condition.

2. In Dysentery the evacuations are  
more abundant; in Dysentery they are uni-  
formly copious.

3. In the first mentioned disease the  
stools are voided with the utmost difficulty  
and most excruciating pain. In the second  
much uneasiness is seldom experienced  
during an evacuation.

4. The excretion in Dysentery more  
often assumes a natural appearance except when  
the discharge is composed of coagula. In Dy-  
senteria they usually possess more or less  
of this character.

### Prognosis

In numerous instances we shall find



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no little difficulty in forming a just opinion  
with regard to the event of the disease.

In general however the tongue becoming  
free from an accumulation of offensive matter,  
the excreta assuming a natural consistence  
and color, the pulse concomitant of the fever  
was abating, the eye retaining its wonted lustre,  
and the restoration of appetite, prognosticated a  
favorable result.

On the contrary, a  
sudden sinking of the pulse which continued  
tumid and scarcely perceptible, the in-  
crease of the debility, the frequent discharge  
of a dark fluid blood or of a matter approx-  
imating in appearance the *liturae carneae*,  
difficulty of deglutition, with the supervention  
of subcutaneous tenderness and petechiae, are  
ominous of a fatal termination. Should  
the disease be associated with a scorbutic  
affection, or an advanced stage of Phthisis





salmonale, or should the constitution of the patient be previously debilitated by any other disorder, we cannot with plan, safely calculate on a convalescence -

### Remote Causes

1. We are well aware that noxious exhalations - exhaled from marshy grounds in sultry weather proving instrumental to the production of the febrile affections so prevalent at such times - The miasmata thus evolved may with propriety be "located" among the remote causes of the disease under consideration.

2. Intense Heat: by inducing relaxation of the system, renders it more susceptible to the operation of the exciting to be presently enumerated.

3. An exercising & similar agency, more minute corporeal exertions may be included



the catalogue of Causes - 1<sup>st</sup> The depressing mental passions, from occasioning loss of appetite, may with propriety be considered as productive of debility and consequently as predisposing to the disease. 2<sup>d</sup> Puerious diet, as corrob-  
orant of this observation I must remark that Dysentery appears to attack with more alacrity and greater violence the indigent, than those in the enjoyment of opulence and luxury.

3<sup>rd</sup> Frequent incubation

With regard to the contagious nature of Dysentery, no inconsiderable diversity of sentiment has prevailed. Cullen maintains that Dysentery is always contagious: but, guided by the concurrent evidence of the most respectable modern practitioners we are induced to consider this affection erroneous & untenable. The incontrovertible fact that a strict attention to cleanliness and freedom of Ventilation effectually



precludes the propagation of the disease under co-  
sideration is sufficient to justify our interven-  
tely with regard to Leulier's declaration.

### Exciting Causes

Colic is most frequently occasioned  
by the direct applications of cold to the body  
subsequently to its exposure to the Remote Causes  
above mentioned, from which exposure the system  
has acquired moderate susceptibility to morbid  
impressions. In confirmation of this assertion it  
may be proper to remark that in warm weather  
armies are almost invariably attacked with Dys-  
entery, when after a long march, or any violent ex-  
ercise, have slept on the humid earth or been ex-  
posed to falling rain. In these cases, the per-  
istaltic being suddenly superseded, the determination  
by nervous sympathy is raised to the Intestines and  
a disturbance of their functions at a necessary con-  
sequence ensues. - In many instances, however,



the primary impression is made on the stomach as  
 is witnessed by the anorexia and nausea which are  
 generally the precursors of the proper dysentery.  
 symptoms as mucous sanguineous evacuations, &c.

### Proximate Cause

It has generally been supposed to consist in  
 preternatural constriction of the colon, but we  
 are inclined to believe that this constriction is only  
 a consequence of the pre-existing inflammation of  
 the intestines, and this hypothesis receives some validity  
 from the circumstance of the spasmodic constriction  
 never occurring antecedently to the appearance of  
 febrile symptoms.

We therefore presume the proximate  
 cause of Dysentery to consist simply of inflamma-  
 tion of the intestines, or in other words, an irregular  
 morbid action of these vessels arising as the only the  
 way to which we can satisfactorily account for  
 the several symptoms indicative of this affection &c.





unhesitatingly adopt it. — Having now assigned  
the several causes of *Obstruction* we proceed to its  
signals the appropriate

### Treatment.

Called to a patient of a robust and plethoric  
make, I would without delay have recourse  
to the most direct means of diminishing the cir-  
culation of the sanguiferous system — I mean the de-  
struction of blood — (1) prompt and copious veni-  
section, at the very commencement, will often ex-  
adicate every vestige of the disease and whilst  
it acts in effecting this, will with certainty  
afford a palliation of the symptoms. Impressed  
with this belief, I would strenuously recommend  
an enlargement of the practice as long as there ap-  
peared any indications of inflammatory diathesis.

The principle upon which phlebotomy  
acts in thus signaling its utility, admits of a  
ready explanation: by diminishing the activity



of the circulation we obtain a resolution of Spasms and prevent the injurious consequences which would result from excessive Vascular excitement.

Efficient and energetic however as the abstraction of a copious quantity of blood at the accession of an attack may frequently prove in diminishing the progress of Dysentery, we shall in some instances discover that after its complete establishment the disease will resist with pertinacity our best directed endeavours for its arrestation, ~~and~~ exercising with a violence scarcely mitigated by our most approved and powerful remedies its imperious dominion over the unfortunate subject to its influence.

Our next consideration should be the state of the Stomach. The slightest manifestation of gastric inquietude will justify the abstinence of an Emetic. By this, independently of the advantage obviously resulting from the removal of foul and oppressive accumulations



thus we make a decidedly salutary impression on  
 the system. Should a single dose prove inadequate  
 to the accomplishment of this purpose a repetition  
 will be required. In regard to the article  
 by which vomiting should be excited there is  
 some discrepancy of opinion among practitioners.  
 some of whom recommend Bartrate of Potash, others  
 whilst others advise the employment of Ipecacuanha.  
 With the latter sentiment I coincide, believing  
 this medicine to be peculiarly adapted to the  
 disease in question, and particularly to those  
 cases (when used in minute doses) when there  
 is a frequent discharge of sanguinous matter.  
 The course of treatment having  
 been prescribed, our attention should be directed to  
 promoting the evacuation of irritating feculent  
 matter. - In mild cases Olean Ricini <sup>oil</sup> fruit  
 will be sufficient to fulfil this indication. But  
 should the attack be more severe, the sublimated



of Mercury is greatly preferable in conjunction with  
Rhubarb this medicine will frequently prove sig-  
nally advantageous. Should any circumstances pre-  
hibit its ready operation it will become necessary  
to prescribe Sulphate of Magnesia.

Having by these means accomplish-  
ed a thorough discharge of the contents of the In-  
testines, it will be unnecessary to continue the ad-  
ministration of Calomel unless there exist in-  
disputable evidence of hepatic derangement.  
It will be proper however to exhibit the Castor  
oil until the face begins to assume a natural  
appearance.

With a view to draw an absorp-  
tion of the Serum & Venousness the oleaginous  
Mixture may be prescribed.

### Carminals

These should not be too freely or indis-  
criminately employed, as the frequent introduction





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if the pipe is apt to induce severe irritation of the Rectum the Cases to which they are most applicable are those where from irritability of the Stomach, medicines cannot be retained. Mucilaginous injections are, not unfrequently productions of consequences unequivocally beneficial.

(C) After the removal of the inflammatory symptoms, and the evacuation of the alimentary canal, medicines calculated to cause a determination to the surface should be exhibited. As a diaphoretic, Ipecacuanha may be directed in minute doses: and as exercising a similar power Dover's Powder will be found an important remedy. — A combination of Opium, Ipecacuanha and Calomel will excite a gentle perspiration and allay excitement. — In the sinking stages of debility stimulants should not be omitted. Of these Opium & Carbonate of Ammonia possess the most decided claims to our attention.



The application of a flannel roller to the chest and abdomen during the continuance of the disease is recommended by practitioners of respectability as conducive to convalescence.

When the pains continue unmitigated together with abnormal tumefaction, fomentations may be tried, and if no benefit result from their employment, Blesties may be resorted to with decisive utility.

Clides, however, (as before observed) will sometimes occur, when all the remedies now enumerated will prove inadequate to the removal of the disease.

Under these circumstances, we should without hesitation have recourse to the exhibition of Mercury in order to excite a Pygalism. By the induction of a salivation the former train of "morbid operations" is subverted. & a new action salutary in its operation is

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substituted. — When, on account of idiosyncrasy, the possibility of salivating the patient by the internal administration of mercury is precluded, we should resort to frictions of the ung. Hydr. to the inner surface of the thighs.

The diet in this disease should consist of the farinaceous and mucilaginous articles. — The drinks should be demulcent. — — —

